

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	ET		8-19-95
O.I.P.E. CLASSIFIER		12	8/24
FORMALITY REVIEW		71435 71035	9/7/95 10/28/95

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 (Through numeral)... Canceled      A ..... Appeal  
 - ..... Restricted      O ..... Objected

BEST AVAILABLE COPY

Claim	Date
Final	
Original	
1	3/25/01
2	6/24/01
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4	11/24/02
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Claim	Date
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Original	
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52	4/3/02
53	11/24/02
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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